



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION 5

230 SOUTH DEARBORN ST.

CHICAGO, ILLINOIS 60604

REPLY TO THE ATTENTION OF:

RCRA ACTIVITIES

GENERAL WEB DYNAMICS

P.O. BOX 5767

Rockford, IL 61125

RE: EPA ID #: ILD005071899

In response to your request of 9-15-86 the following information
has been updated:

change of contact
change of ownership

If you have any questions, please contact Sharon Kidden at 886-6173.

Sincerely,

A handwritten signature in cursive script, appearing to read "Arthur S. Kawatachi".

Arthur S. Kawatachi
Information Unit
Program Management Section

cc: State Agency
File

ID — For Official Use Only													
C												T/A	C
W													1

X. Description of Hazardous Wastes (continued from front)

A. Hazardous Wastes from Nonspecific Sources. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
D 0 0 1					
7	8	9	10	11	12

B. Hazardous Wastes from Specific Sources. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. Commercial Chemical Product Hazardous Wastes. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

D. Listed Infectious Wastes. Enter the four-digit number from 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54

E. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 — 261.24)

☒ 1. Ignitable
(D001)

☐ 2. Corrosive
(D002)

☐ 3. Reactive
(D003)

☒ 4. Toxic
(D000)

XI. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature

Dan R. McDougall

Name and Official Title (type or print)

Dan R. McDougall Mfg. Eng.

Date Signed

9-15-86

ID - For Official Use Only											
C										T/A	C
W											1

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(D001)

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Signature

Name and Official Title (type or print)

Date Signed

EPA Form 8700-12 (Rev. 11-85) Reverse

I am filling out this form because this
Company ~~was~~ is a non-notifier + IEPA want
to get it in our system.
6-20-8
Brian Newquist



**ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY
(VERIFICATION)**

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

•ILD0005071899

INSTALLATION ADDRESS

ROCKFORD SERVO CORP GEN WEB DYNAMICS DIV
PO BOX 5767
ROCKFORD IL 61125

4960 28TH AVE
ROCKFORD

IL 61109

m 9/30/85

Please print or type with ELITE ty

ters/inch) in the unshaded areas only.

No. 0246-EPA-OT Expiration Date 12/31/86

U.S. ENVIRONMENTAL PROTECTION AGENCY
NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means: single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).

INSTALLATION'S EPA I.D. NO.

I. NAME OF INSTALLATION

II. INSTALLATION MAILING ADDRESS

III. LOCATION OF INSTALLATION

RECEIVED

SEP 06 1985

PLEASE PLACE LABEL IN THIS SPACE

SWB - AIS

U.S. EPA, REGION V

27 SEP 1985

COPY

FOR OFFICIAL USE ONLY

COMMENTS

INSTALLATION'S EPA I.D. NUMBER

APPROVED

DATE RECEIVED

1LD0005071899

A

8/5/85

Rockford Servo Corp Gen
WEB Dynamics Div

I. NAME OF INSTALLATION

GENERAL WEB DYNAMICS DIV.

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX

3 P.O. BOX 5767

CITY OR TOWN

4 ROCKFORD

ST. ZIP CODE

IL 61125

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER

5 4960 28TH AVE

CITY OR TOWN

6 ROCKFORD

ST. ZIP CODE

IL 61109

WINNEBAGO
201

IV. INSTALLATION CONTACT

NAME AND TITLE (last, first, & job title)

PHONE NO. (area code & no.)

2 FRANZEN, GARY PURCHASING MGR.

815-226-8860

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER

8 ROCKFORD SERVO CORPORATION

B. TYPE OF OWNERSHIP
(enter the appropriate letter into box)

VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))

F - FEDERAL
M - NON-FEDERAL

A. GENERATION

B. TRANSPORTATION (complete item VII)

C. TREAT/STORE/DISPOSE

D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(es))

A. AIR

B. RAIL

C. HIGHWAY

D. WATER

E. OTHER (specify):

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA I.D. Number in the space provided below.

A. FIRST NOTIFICATION

B. SUBSEQUENT NOTIFICATION (complete item C)

C. INSTALLATION'S EPA I.D. NO.

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

W

1/1

12 12 85

DESCRIPTION OF HAZARDOUS WASTES (continued from front)

HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1 FOO1	2 FOO3	3	4	5	6
7	8	9	10	11	12

HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31 U002	32 U161	33 U226	34 U239	35	36
37	38	39	40	41	42
43	44	45	46	47	48

LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54
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CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

☒ 1. IGNITABLE
(D001)

☒ 2. CORROSIVE
(D002)

☒ 3. REACTIVE
(D003)

☐ 4. TOXIC
(D004)

CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE

George M. K. Herold

NAME & OFFICIAL TITLE (type or print)

GEORGE M. K. HEROLD
Lab Manager

DATE SIGNED

9/4/85

Please print or type with ELITE type (12 characters/inch) in the unshaded areas only.

U.S. ENVIRONMENTAL PROTECTION AGENCY
NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

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INSTALLATION'S EPA I.D. NO.

I. NAME OF INSTALLATION

II. INSTALLATION MAILING ADDRESS

III. LOCATION OF INSTALLATION

RECEIVED

SEP 06 1985

PLEASE PLACE LABEL IN THIS SPACE

SWB - AHS
U.S. EPA, REGION V

FOR OFFICIAL USE ONLY

COMMENTS

INSTALLATION'S EPA I.D. NUMBER

APPROVED

DATE RECEIVED (yr, mo, & day)

F I L D 0 0 5 0 7 1 8 9 9

A

8 5 0 9 0 6

I. NAME OF INSTALLATION

G E N E R A L W E B D Y N A M I C S D I V .

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX

P . O . B O X 5 7 6 7

CITY OR TOWN

ST.

ZIP CODE

R O C K F O R D

I L 6 1 1 2 5

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER

5 4 9 6 0 2 8 T H A V

CITY OR TOWN

ST.

ZIP CODE

R O C K F O R D

I L 6 1 1 0 9

IV. INSTALLATION CONTACT

NAME AND TITLE (last, first, & job title)

PHONE NO. (area code & no.)

F R A N Z E N , G A R Y P U R C H A S I N G M G R .

8 1 5 2 2 6 8 8 6 0

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER

R O C K F O R D S E R V O C O R P O R A T I O N

B. TYPE OF OWNERSHIP (enter the appropriate letter into box)

VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))

F - FEDERAL
M - NON-FEDERAL

M

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